

## REPORTS INVENTORY

CONTROL NO.

SRB 951 H

PREPARE IN DUPLICATE

1. TITLE OF REPORT (if a fill-in report include Form No.)

951 H LIFE INS AGT NEW DED

2. TYPE  
OF  
REPORT

STATISTICAL

NARRATIVE

MACHINE-NAME LISTING

3. FUNCTIONAL AREA

☒ PERSONNEL

TRAINING

LOGISTICS

SECURITY

MEDICAL

FINANCE

ADMIN. GENERAL

OTHER (specify)

4. NO. OF COPIES PREPARED

1

5. FREQUENCY (weekly, monthly, quarterly, etc.)

Monthly

6. DISTRIBUTION (No. of components not  
number of copies)

2

7. FORMAT (memorandum, form,  
computer print-out, etc)

CP-0

8. ADP PROCESSING

☒ YES

IF YES GIVE ADP PROCESSING NO.

NO

9. DIRECTIVE AUTHORITY REQUIRING REPORT

10. PREPARING COMPONENT (include lowest level  
contributing information to report)

DCS/OPERATIONS

11. FEEDER REPORTS (State total number and identify by Title,  
Form No., or nomenclature. Attach separate sheet if necessary.)

## 12. COST FACTORS

## A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED	=	COST PER YEAR
GS063	4.21		.143		.60		12		7.20

## B. COSTS OF COMPUTER PRODUCED REPORTS

			.05		12				.60
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TOTAL COSTS PER YEAR

\$ 7.80

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN,  
INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

## 14. FUTURE GOALS

14a. PROPOSED BY COMPONENT FOR THIS REPORT

☐ RETAIN AS IS☐ OTHER (explain)☐ CHANGE☐ DISCONTINUE

ESTIMATED SAVINGS

MAN-HOURS

DOLLARS

14b. DATE OF INVENTORY

2 NOV 1970

STAT

FORM 142

Classification